

# CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/											
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50												
TOTAL IND.	3		1									
TOTAL DEP.	17		12									
TOTAL CLAIMS	20		13									
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TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS